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ABSTRACT

The Teenage Health Teaching Modules (THTM) program is a health education curriculum for adolescents. Each THTM module frames an adolescent health task emphasizing development of self-assessment, communication, decision making, health advocacy, and self-management. The major goals of this module are to promote feelings of self-acceptance in adolescent youths, to develop skills in coping with emotions, and to learn to relate to the feelings of others. Five class activities are outlined, each of which involves a mini-lecture and group discussions. The topics are: (1) the range of feelings and their relationship to the body; (2) coping with and responding to feelings; (3) responses to both positive and troubled feelings; (4) responding to the feelings of others; and (5) feelings and self-acceptance. A list of programs and resources relevant to the module are presented. (JD)

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PRELIMINARY DRAFT
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DEPARTMENT OF HEALTH & HUMAN SERVICES

Public Health Service
Centers for Disease Control

Memorandum

Date: October 1983

From: Director, School Health and Special Projects
Division of Health Education
Center for Health Promotion and Education

Subject: Teenage Health Teaching Module
LIVING WITH FEELINGS

To: Colleagues in School Health and Health Promotion

The attached module, Living with Feelings, is one of sixteen modules in the Teeange Health Teaching Modules (THTM) program. The overall goal of this health curriculum for adolescents is to provide secondary school students with knowledge, skills, and understandings that will enable them to act on behalf of themselves and others in health-enhancing ways. Each THTM module frames an adolescent health task and is designed to help students contribute to their own present and future health and well-being and that of the families, schools, and communities to which they belong.

The THTM program was produced under contract (CDC 200-79-0922) between the School and Society Programs of the Education Development Center, Inc., and the Center for Health Promotion and Education of the Centers for Disease Control.

Inquiries related to this module should be directed to this office. Write or call:

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SP 026 475

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SP 026 475

This is one module in the Teenage Health Teaching Modules (THTM) program, a health education curriculum for adolescents developed by Education Development Center, Inc. (EDC) and funded by the Center for Health Promotion and Education, Centers for Disease Control, Public Health Service, U.S. Department of Health and Human Services.

The overall goal of the THTM program is to provide secondary school students with knowledge, skills, and understandings that will enable them to act on behalf of themselves and others in health-enhancing ways. Each THTM module frames an adolescent health task and is designed to help students contribute to their own present and future health and well-being, and that of the families, schools, and communities to which they belong.

The THTM program emphasizes development of the following health skills: self-assessment, communication, decision making, health advocacy, and self-management. For a complete description of the THTM program, additional materials, or assistance in using these materials, please write or call Teenage Health Teaching Modules, Education Development Center, Inc., 55 Chapel Street, Newton, MA 02160, (617) 969-7100. Official health and education agencies may also contact the School Health and Special Projects Office, Division of Health Education, Center for Health Promotion and Education, Centers for Disease Control, Atlanta, GA 30333, (404) 329-2829 or FTS 236-2829.

TEENAGE HEALTH TEACHING MODULES

Health Is Basic: An Introduction to the THTM Program for Teachers and Students

Understanding Growth and Development

Being Fit

Eating Well

Communicating in Families

Promoting Health in Families

Having Friends

Living with Feelings

Handling Stress

Protecting Oneself and Others: Smoking, Drinking, and Drugs

Preventing Injuries

Improving Health and Safety in the Workplace

Locating Health Resources

Using New Health Research

Acting to Create a Healthy Environment

Planning a Healthy Future

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Introduction

Understanding our feelings is a prerequisite to healthy adult lives. Most of us have had several decades to learn about ourselves, and the large spectrum of emotions through which we experience our lives. We have learned, for the most part, to respond constructively to what we feel, but there are times when we may feel mystified and confused--even overwhelmed by our feelings as we grope through daily events.

Adolescents are just beginning this learning process. They are exploring new feelings, trying to sort out what they mean and how to respond to them. They are anxious for more independence but are often unsure about breaking old patterns. They may love and resent their parents at the same time, and express their ambivalence with a bewildering range of behavior. The peaceful child can become a moody young person, suddenly leaping with joy at getting a job or receiving a long-awaited phone call, only to swing down abruptly to a brief "low" over a poor grade. It is a stage of development in which moodiness is the norm, a norm that can tax even the most patient parents or teachers.

Adolescence is a period of rapid physical growth, hormonal change, and the emergence of mental abilities. As adolescents begin to deal with the world outside home, they inevitably encounter some negative or confusing experiences. In transition mentally, emotionally, and physically, they feel shaky about their skills. They are beginners in many ways--first job, first dates, and for some, first sexual experiences. All these changes cause stress, and adolescents need help understanding their stressed feelings.

Adolescents experience their feelings with great intensity. Partly, the intensity is caused by feelings of "foreverness" associated with adolescence. First love seems as though it will last forever; shyness can feel like a handicap that will be crippling forever. Not being "pretty enough" or "tall enough" can cause desperate longings to be otherwise. One of the goals of this module is to help adolescents recognize that their intense feelings are important and natural, but that they will change. We want to help adolescents keep in perspective those emotions that seem so acute and to help them recognize that feeling is basic to existence. We want them to realize that everyone has feelings

all the time, at all ages. This module also reinforces the theme that expressing these feelings to trusted others, such as family and friends, is healthy. Getting help when necessary is also healthy.

To some adolescents, intense feelings can feel unmanageable, whether they are unhappy or joyful ones. It is important that they learn various ways to live with their feelings and ways to understand some of the behaviors that grow out of an intense inner life. We all learn constructive and destructive ways to react to what we feel; it is one of the goals of this module that adolescents learn to distinguish between the two. Getting drunk when depressed or angry is less than healthy; holding anger in until it turns to rage or explosive behavior towards family or friends is also destructive. Since we now know that prolonged stress takes its toll physically in the onset of disease, teaching adolescents healthy choices about coping with feelings is also teaching them choices that affect their physical health. We want teens to know they have a choice. Adolescents are beginning to master their own lives; making appropriate choices helps them feel that they have better control over their destinies.

Understanding one's own feelings is important, but so is understanding the feelings of others. The better the adolescent can understand the feelings of people important to them the more closeness and intimacy can be achieved in relationships. Some people seem to be born with the ability to be sensitive to others' feelings, but in fact it is a skill that anyone can learn and improve on with practice. Most young people want to be close to others--witness the power of peer groups and "best friends"--and to offer help when needed.

A major goal of this module is to promote feelings of self-acceptance, a difficult but crucial task of adolescence. Without self-acceptance, self-esteem is impossible, achievements more difficult, and relationships with others strained. Feelings are the inevitable companions to living; embracing them is critical to self-acceptance. Of course, a nurturing family and supportive environment at school can contribute to a teen's sense of self-acceptance. But self-acceptance is basically a private, ongoing process--one that we hope teens will work toward for the good of themselves and others.

Note: A booklet for students entitled Thinking About Feelings accompanies this module. Students read specified sections of the booklet in the activities that follow, either in class or as homework. You may want to preview the entire booklet before starting your preparation so you can incorporate additional activities or questions as you teach the module.

Goals of the Module

This module will:

- Help students understand that feelings are a natural part of our lives.
- Promote the idea that emotional and physical health are interrelated.
- Reinforce the theme that family and friends can help with troubled feelings.
- Help students distinguish between constructive and destructive ways of behaving in response to their feelings.
- Expose students to various coping strategies that can help them to manage their behavior in times of intense feeling.
- Help students develop listening and communication skills as an effective strategy for helping others sort our feelings.
- Enable students to transfer knowledge of coping skills to others.
- Promote the idea that understanding feelings contributes to a sense of well-being and self-acceptance.

Module Overview

ACTIVITY	DESCRIPTION	INSTRUCTIONAL METHOD	# OF CLASS PERIODS
One			
Feelings: Their Range and Their Relationship to Your Body	Students discover the range of feelings and their influence on behavior--the psychology of emotions. They will observe close connections between body and emotions.	Discussion, activity in Thinking About Feelings, "Feelings and Your Body" chart, physically portraying a feeling situation, and performing a brief role play.	2 (or 3)
Two			
Choices: Coping with Feelings, Responding to Feelings	Students examine the issues of choice and compare responses (feelings); they look at healthy and unhealthy responses to anger.	Mini-lectures, discussion, scripted scenes, brainstorming, case histories (film variation), activity in Thinking About Feelings.	2

Note: The numbers of class periods listed for each activity are suggestions only. Teachers are urged to make their own determinations based on the interests and abilities of their students.

ACTIVITY	DESCRIPTION	INSTRUCTIONAL METHOD	# OF CLASS PERIODS
Three			
More Choices: Coping with Feelings, Responding to Feelings	Students look at responses to troubled feelings and also look at positive feelings.	Word association, discussion, question-and-answer session with guest speaker, chart, activity in Thinking About Feelings, creating books.	1-3
Four			
Skills: Responding to the Feelings of Others	Students learn how to "listen to" the feelings of others and practice helping skills. They then put helping and coping strategies to work.	Brainstorming, mini-lecture, activities in Thinking About Feelings	2
Five			
Explorations: Feelings and Self-Acceptance	Students explore feelings about self and set goals for a sense of self-acceptance. They analyze feelings that get in the way of self-acceptance	Mini-lecture, scripted scenes, analysis, discussion, guided response (letter to myself).	2

Activity One

Feelings:
Their Range and Their Relationship to Your Body

Objectives

Cognitive: Students will be able to:

- Identify a range of feelings in themselves.
- Cite examples of how feelings affect behavior.
- Identify important elements of body language.

Affective: Students will:

- Accept that a wide range of feelings is natural, not unusual, harmful, or shameful.
- Value and appreciate the way the body and the mind work together to express emotion.

Skills: Students will be able to:

- Explain how feelings motivate behavior.
- Identify emotional cues expressed by body language.

Activity at a Glance

Through discussion and a chart, students explore the range of feelings, look at the relationship between feelings and the body, and identify ways in which feelings affect behavior. They then develop "frozen" scenes of emotionally charged situations and interpret the physical "cues" they manifest in a brief role playing activity.

Preparation

1. Read through Thinking About Feelings, if you have not already done so.

2. A good resource for the entire module is The Teenage Body Book, by McCoy and Wibblesman (New York: Simon and Schuster, 1980). The book addresses adolescent concerns in a direct and sensitive way, at the same time providing adults with important information about most of the important issues of adolescence. The chapter "Your Changing Feelings" is particularly pertinent.

3. Optional: Duplicate "Lots of Feelings," a copy for each student.

Note: All material to be duplicated for student use in each activity appears on boxed pages at the end of the activity.

4. Duplicate "Feelings and Your Body," a copy for each student.

5. For the second day's activities, you may want to push chairs to one side of the room so that there is plenty of open space for groups of students to perform their stories.

6. Activity Three calls for a professional in the field of mental health to lead a discussion on depression. This is an important activity, because students need to know that there are knowledgeable and sympathetic persons to whom they can turn if they feel they need help. You will want to make contacts now to insure that you have someone available for that day's class. Explain to the professional that it will be an informal discussion about troubled feelings in general, but specifically about depression, with emphasis on when to seek outside help and how and where to ask for it. Mention that you would also like some attention paid to the problem of what to do if a friend feels suicidal. If possible, provide the professional with a copy of the activity.

One cautionary note: Even though this is an important discussion for adolescents, it is possible that there might be a situation in which it would not be wise to put so much emphasis on depression and suicide. If you have any question about whether one of your students might be adversely affected by the discussion, check with your school nurse or counselor. Look ahead to Activity Three for alternative strategies for dealing with the content of the activity.

Procedure

Day One

1. Lots of Feelings

Read aloud quickly the feelings listed below. (Distribute the duplicated list if it will help your students.) Ask students to add any other feelings they think of. Be sure to emphasize that no feeling is too weird or silly to mention, and that most people experience all the feelings named at some time in their lives.

accepted	eager	rejected
affectionate	envious	relaxed
angry	frightened	restless
anxious	happy	sad
bored	hopeful	secure
brave	hurt	sexy
calm	kind	shy
competitive	lazy	startled
confident	lonely	stupid
confused	nervous	sympathetic
cruel	overwhelmed	tired
depressed	peaceful	worried
disgusted	proud	

Discuss feelings in general with the class, focusing on the following important points:

- What are feelings? (Responses to people, events, situations that move us in some way)
- When do people have them? (All the time, even when they are asleep. Babies have them, as well as very old people.)
- How does the body respond to intense feelings? (Increased heartbeat, flushing, rush of energy, body feeling light or heavy)
- How do we learn to respond to feelings? What are some appropriate and inappropriate responses?

2. Feelings and Your Body

Distribute "Feelings and Your Body" and give students a few minutes to absorb the information. Point out that the body and the mind are not separate entities: what is felt emotionally is felt in the body. In turn, the body can affect one's emotional life.

(Notes on chart information: Researchers think that the hormone prostaglandin, which is secreted during the menstrual cycle, may contribute to feelings of fatigue, depression, and lethargy. Adrenalin and noradrenalin are released into the bloodstream, speeding up the flow of blood and making stored body energy available to organs.)

Pose the following questions about the intimate relationship between the mind and the body for discussion by the class. (It is important to mention that usually a complexity of feelings is experienced, and therefore there will be a complex response in the body.)

- When you hear a beautiful piece of music, how do you feel? How does your body feel?
- When you feel confident, how does your body feel?
- When you see a movie or read a book that moves you, how do you know you're moved?
- When you think about someone important you have lost--through death, separation, or moving--how does it affect your body?
- When you think about someone you like a lot (a good friend, a boy friend or girl friend), how does your body respond?
- When you feel anxious, how does your body respond?

Help students distinguish between normal and severe anxiety by explaining that anxiety normally occurs before an important challenge, like an examination, a social event, a charged discussion. Normal anxiety is the feeling of "butterflies" in the stomach, sweating in your hands or armpits, quivering in your body, a quavering voice, and sometimes nausea or headaches. However, severe anxiety, nervousness with no apparent cause, or unrelieved, constant anxiety may be a sign that you need expert help in finding and dealing with what is troubling you.

3. Feelings and Behavior

Ask students to turn to "Last Time I Felt That Way," page 3 in Thinking About Feelings. This activity will help students consider how emotions affect thinking and behavior, and how feelings motivate behavior. After they share a few of their responses to "Last Time I Felt That Way," reinforce the purpose of this activity by pointing out that:

- Human beings are intricate systems: feelings affect the body; the body affects the emotions.

- How we feel motivates what we do, and colors our perceptions of our actions.

4. Homework

Ask students to read pages 4-7 in Thinking About Feelings. This material will help them to recognize certain emotions that everyone experiences from time to time, and to begin thinking about different responses to various emotions.

Day Two

Note on Timing: You may want to spread this session over two classes, doing the tableaux one day and the role plays another. Or, you may choose to do one or the other, not both.

1. Portraying Emotional Scenes

Ask students to think of an emotionally charged situation they have been in recently. Have them recall the time and place and remember the scene as vividly as possible: who was there, what was going on, what positions people were in.

Divide the class into groups of four to six students and have each group choose a "director," whose story will be portrayed. Each director tells his or her group about an emotionally charged situation. The director should explain who was present, where they were, and what they were doing.

Next, the director picks someone to play him- or herself, and designates which roles the others in the group will take. The director then arranges the players in the exact positions people were in at the time of the original incident. As a group, they create a tableau: there should be no movement or sound, just the three-dimensional picture of movement frozen in time.

As the groups work on this problem, walk around and help them.

- Are they being sensitive to their use of space and to their body language?

- Is it possible to "read" their scenes easily?

- What aspect of posture, expressions, or body attitude help them read the scenes correctly?

Each group should then present its tableau to the other groups. Class members can guess what situation is being portrayed. If they can't tell from the tableau, the group should make spatial adjustments so that its visual statement is clearer.

Once the students have become adept at creating frozen tableaux, the directors can ask them to come alive and begin an improvisational scene. They can then portray what actually happened in the original scenario. Each director, or other students in the class, can stop the action at any point to offer advice about other ways the characters might react. The scene can then be played in that new way.

Creating frozen tableaux is fun and engaging. It requires skill and cooperation. In addition, it is a simple and direct way for students to share personal moments of decision making with each other in a nonthreatening way. However, some teenagers may not wish to discuss these issues on a personal level. In that case, rather than urging them to speak, you might simply ask the question and allow for quiet reflection, or you might suggest students write anonymous recollections.

Conclude the session by telling the class that what they just did in a large dramatic way goes on every day in more subtle ways. Our bodies reveal what we feel, because our bodies and our minds are related:

- People involuntarily express their true feelings with gestures, posture, facial expressions.
- By smiling or frowning, looking attentive or preoccupied, slamming a door or closing it gently, walking with a spring in the step or dragging the feet--the body is revealing the inner life of its owner.
- Your body can tell you and others how you're feeling.

2. Role Playing Situations

Call for two volunteers to improvise a role play, using one of the situations indicated below. Emphasize that they should react as though the situation were real. Ask observers to watch for body language that reveals the feelings of the role players.

A. Teacher to student: "You're not trying!"

B. Parent to teenager: "I do respect your privacy--but if you don't clean your room, I'm marching right in there to do it for you!"

C. Sister to brother: "I am just sick of it. Gramma died a year ago and you're still just acting like a little baby!"

D. Girl to boy (boy to girl): "You're so smart and so good-looking, I'd like to go out with you sometime!"

E. Girl to girl: "You just made the track team!"

After the role play, observers should discuss what they noticed about the subtle ways in which the bodies of the volunteers showed what was being felt:

- What gestures did they notice?
- What emotions were indicated by the tones of voice?
- What did the distance or closeness between the two role players reveal about the nature of the discussion?

Participants should report back on the following:

- In terms of emotion, which feelings were stronger--feelings about being in front of people (stage fright), or feelings aroused by the situation being role played?
- How did these emotions/feelings affect your body? In other words, how did your body respond to either the stage fright or the emotions inherent in these situations? (Refer them back to "Feelings and Your Body.")
- What did you feel like doing after you heard these first lines?

3. Homework

In the next session students will consider coping strategies. In preparation for this, they should read pages 16 and 17 of Thinking About Feelings. This is a brief but important reading assignment. Urge students to read these two pages carefully, so that they can discuss the material with the class.

LOTS OF FEELINGS

accepted
affectionate
angry
anxious
bored
brave
calm
competitive
confident
confused
cruel
depressed
disgusted
eager
envious
frightened
happy
hopeful
hurt
kind
lazy
lonely
nervous
overwhelmed
peaceful
proud
rejected
relaxed
restless
sad
secure
sexy
shy
startled
stupid
sympathetic
tired
worried
_____
_____
_____
_____

FEELINGS and YOUR BODY

SITUATION/EVENT/STIMULUS

— Like a fierce dog, a big test, an important date, a speech to make before a group of people.

— Your perception of the situation, event, or stimulus colors how you will feel about it.

EMOTION

— Which is your response to the stimulus.

BODY RESPONSE

— Mostly through autonomic (involuntary) nervous system.

- ADRENALIN AND NORADRENALIN RELEASED
- HEART BEATS FASTER, HARDER
- HAIR STANDS UP, OR SKIN GETS GOOSEBUMPS
- PERSPIRATION OFTEN APPEARS
- MOUTH CAN FEEL DRY
- FAINTING (often in extreme fear)
- FLUSHING OR BLUSHING (as in excitement before speech)
- DIARRHEA (as in athletes before a big event)
- IN ADDITION, EMOTIONS HELD IN TOO LONG MAY MANIFEST THEMSELVES IN SYMPTOMS SUCH AS HEADACHES, STOMACH ACHES, BACK PROBLEMS.

— In turn, your body affects your own "feeling life", as in the following:

- EXHAUSTION PRODUCES FEELINGS OF DISORIENTATION, IRRITABILITY.
- RESEARCHERS THINK HORMONAL SECRETIONS MAY CAUSE PREMENSTRUAL DEPRESSION AND TENSION.
- INGESTION OF ALCOHOL AND SOME DRUGS DOES CAUSE VARIOUS "DOWN" FEELINGS; AT FIRST YOU MAY FEEL "HIGH", BUT THESE SUBSTANCES ARE DEPRESSANTS.

Activity Two

Choices:
Coping with Feelings, Responding to Feelings

Objectives

Cognitive: Students will be able to:

- Distinguish between positive and negative ways of handling feelings.
- List ways to cope with angry feelings.

Affective: Students will:

- Recognize that adolescence can be a time of mixed feelings.
- Accept that coping with feelings involves choosing among different behaviors.
- Recognize that all people feel anger, and deal with it in different ways.
- Recognize that feelings will not just go away, be denied or repressed.

Skills: Students will be able to:

- Evaluate their own responses to anger.
- Identify various positive coping strategies for use in their own lives.

Activity at a Glance

Students hear a mini-lecture, look at issues of choice, and examine scripted scenes that show teens responding to positive situations. They do an exercise in Thinking About Feelings, and consider constructive and destructive ways of coping with anger.

Preparation

1. Duplicate "Scenes" and paste each one on a card. You may want to look again at The Body Book, which addresses some of the issues facing adolescents and influencing their choices about behavior.

2. Duplicate "Mishandling Anger," a copy for each student.

3. As background for this session, refer to Thomas Gordon's Parent Effectiveness Training (New York: Peter H. Wyden, 1975), which offers parents, teachers, and other adults who work with young people a new look at conflict resolution, and new strategies for adults and children to use in dealing with anger. Another excellent book that presents some new data on dealing with anger is Carol Travis's Anger: The Misunderstood Emotion (New York: Simon and Schuster, 1982).

4. Ideally, you should make copies of "Depression" and "You Should Know" and distribute them before the next activity, so that students will have time to mull over what concerns them and prepare questions for the guest speaker.

Procedure

Day One:

1. Choosing How to Respond to Feelings

Present the following information as a mini-lecture or any way you choose. It is designed to put adolescents at ease about the nature of feelings they sometimes experience in this developmental phase of their lives.

- From time to time, we all experience a mixture of emotions--happy and frightening feelings combined.

- Adolescents face new experiences, problems, and adventures for the first time. As they experiment with them, they may have feelings of failure as well as success, and may feel a sense of shaky self-esteem.

- Adults can feel confused, too, when they have mixed feelings, but they have had more years to learn how to cope with them.

- It is the response to feelings that is important--how a person copes. People cannot always control their feelings but they can control how they respond to them by

choosing among a number of behaviors. A person can feel angry enough to fight--but can choose not to, and walk away, or go hit a punching bag. Or a person can feel full enough of joy to want to hug someone, but it may not be appropriate at that moment.

- As adolescents you are responsible primarily for the action you take on your feelings, not always for the feelings themselves. Much guilt could be avoided if everyone recognized this fact. Many adolescents feel ambivalent about their parents--loving and resenting them at the same time. It is not an unusual feeling. How they act on this mixture of feelings is what counts.

Give students a couple of examples of choice in behavior: when you're angry, for instance, you can choose to yell at the person, say nothing, or count to ten and speak your mind calmly. When you are afraid, you have the choice of holding your ground, running, or screaming for help.

Ask students to think about feeling embarrassed or feeling shy, and to describe alternate ways of responding to these feelings:

- Which responses seem most constructive? Why?
- Which responses seem less constructive? Why?

2. Analyzing Scenes

Divide the class into four groups, and give each one of the "Scenes." Explain briefly that the person in each "Scene" is responding differently to a positive situation. Each small group should analyze its "Scene," taking notes on the following questions:

- How did the person respond to the situation?
- What issues of liking oneself/not liking oneself are raised by the situation? How do you think the other person felt in that situation?
- How else could the person have responded to the situation? What are his or her other choices? How would others view your suggested responses?
- How would you have responded?

After discussion each group should read its "Scene," and its conclusions to the class. Guide their responses according to the following emphases:

- Leo feels he has to be someone else, even though Eliza accepted him as he was. He responded by "changing." How else could he have responded?

- Rosa doesn't want to be characterized as "smart," so she plays down her successes in school. How else could she have responded?

- Tim, like some adolescents, can't think of positive ways of responding to good news or success. Point out that celebration by drinking is not the only way to respond to good news, and that alcohol advertising in our culture overemphasizes the idea. How else could they have celebrated?

- Aretha, like some teens, feels she has to be perfect. Rather than accept the praise and the good feelings, she heard the one, small, negative comment, and responded to that. What else could she have done?

Day Two:

1. Notes for Teacher Mini-Lecture

SOME DIFFERENT ANGERS

One kind of anger is the frustration of a basic need, like the need for approval or acceptance, the need for nurturance, the need to be competent and to feel loved. Another kind is what we feel when a social injustice occurs, and when we are outraged at the folly or cruelty of the world, or destiny. Yet another anger is experienced when something painful happens, over which we have no control--like parents divorcing, or death, or illness. In these cases, it is often difficult for us to recognize feelings of sadness, fear, and loss.

Ask students to brainstorm a list of some situations of daily life that cause anger (like flunking a test, being rejected by a friend, etc.). You can start off by mentioning some small event that caused you to be angry today. Explain that these negative situations usually provoke more than one emotion, but students should choose those in which anger is the predominant feeling. When you have a big list, explain the following:

- Everyone would like to avoid situations like these--but no one can.

- Most people have learned how to cope with troublesome or painful feelings, but it takes time to develop this skill.

- Everyone has choices among different ways of coping.

Read aloud "Handling Anger," pages 8-10 in Thinking About Feelings. Point out which comments are positive. Then ask the class to think of some constructive, healthy ways they have dealt with anger in the past, and to write them down. When they have finished, collect their responses and read each one aloud. Pin them to the bulletin board, labeling it "For Future Reference." Remind students of the list of "Coping Strategies" they did for homework, and mention that each "way" is a sort of mini-strategy for coping with anger.

2. Dealing with Anger

Point out that expressing anger usually is not the best way to deal with it. Bringing it out in the open often only makes the situation worse. But not dealing with the situation itself can be unhealthy; frustration can build up into unreasonable fury. Speaking to the person who has provoked the anger is often a good way to resolve feelings, but there should be some guidelines. Write the following guidelines on the board. As you do this, explain that observing these guidelines helps promote understanding between people who are angry at each other. Read aloud the examples.

GUIDELINES	EXAMPLES
Avoid name calling.	Do not say, "I hope you have to wear braces too someday, pretty boy. Then we'll see who's talking about people looking funny."
Avoid accusing, jumping to conclusions.	Do not say, "You lost my watch and I bet you did it on purpose. You're so selfish."
Do try to describe the way the other person has made you feel.	"You made me feel self-conscious when I heard you whispering about my braces." Or, "That watch was very important to me, and I feel sad that you lost it."
Pick a good time to talk.	A bad time is when other people are around, when you're both tired, or when you're feeling irritable about something else. If you're angry with a parent who is very busy, say, "I wonder if we could talk some time later?"

Some people feel uneasy about talking directly to the person who has caused angry feelings. Ask students:

- If you are not comfortable talking directly with the person who has made you angry, how else can you ventilate your feelings?

Make sure the following suggestions are made: writing feelings in a diary, talking with a friend or trusted adult, exercising rigorously, doing hard physical work, writing a letter about your feelings--then tearing it up or keeping it, crying--which is beneficial to boys as well as girls, though sexual stereotyping has mistakenly made boys often feel silly about, or ashamed of, crying. Sometimes it is not possible, or desirable, to talk with the people who directly (or indirectly) have made us angry.

Refer students to page 18 in Thinking About Feelings, which presents some strategies guaranteed to make things worse. Point out that most of us do not always deal with anger successfully. Ask the class to think privately of less constructive ways they have dealt with anger in the past. Ask:

- Why is anger sometimes difficult to deal with? (Emphasis: Sometimes we think feelings of anger are unacceptable emotions. We may have been taught that angry feelings are "bad." We may fear that expressing anger will make people love us less.)

- How do we learn to deal with anger? (Emphasis: We can learn new ways from our environment, from cultural and ethnic norms--though sometimes it's not easy. A person who has been taught always to hold anger in, may have to begin to express anger in small, constructive ways. A first step would be to keep a diary, or to talk to a trusted friend.)

- Why is it generally unhealthy not to deal with the situation causing anger? (Emphasis: Frustrated anger may come out in other ways. Some doctors feel that depression is, in fact, anger turned inward. Others, however, feel that expressing anger reinforces the emotion and makes it more difficult to deal with the situation causing it.)

3. Mishandling Anger

Pass out copies of "Mishandling Anger." Give the students a minute to read them before pointing out that situations A, B, and C represent harmful ways of dealing with anger--"mishandling" angry emotions. Discuss with the students exactly how each teen is dealing with anger in a destructive, self-defeating way.

Situation A

In this family people deny their anger. Anyone who says, "I never get angry" is either lying or completely out of touch. People can defend themselves against anger by a constant show of sweetness--or toughness. Unexpressed, troublesome feelings can affect your body. It is better to deal with their causes.

Situation B

It is not appropriate to take anger out on yourself by using alcohol or drugs to try to forget. Mistreating yourself is a misdirection of feelings--and the anger only comes back later. In addition, it's double jeopardy--you are adding a depressant (alcohol or some drugs) to anger, a mix almost guaranteed to be more troubling than the original problem.

Situation C

Letting things build up, not dealing with whatever caused the anger, can turn anger to rage. Taking anger out on others is not constructive. Sometimes people think that eating makes them feel better, but overeating (or undereating) is also a self-destructive behavior.

SCENES

LEO

At last the girl of his dreams, Eliza, has agreed to go to the prom. Leo, who is short, goes out and spends two weeks' allowance on elevator shoes, a new haircut, and a rental car. When he picks her up, she says, "What's the matter? You look so different! I thought we were walking to the dance--you told me you loved walking."

ROSA

Having achieved the highest mark on the chemistry exam, Rosa is elated. But she doesn't tell anyone; she fears being "too smart." When someone asks her about the exam, she shrugs and walks away.

TIM

Tim, who wants to be a nurse, just found out he was the only volunteer accepted to work at the local hospital. "Let's go to The Place and really tie one on," he tells his friends. "To celebrate, you know."

ARETHA

When Aretha finished designing an architecture project, her teacher said, "Wonderful! Fix that one roof and you're all set." Aretha then tore the whole structure apart.

MISHANDLING ANGER

Situation A

"Anger? I think it's just better to forget it. Like my mother--she's so sweet, she never gets angry. Our family never argues. We're just cool all the time. It's better that way, you know. But sometimes I get these backaches...."

Situation B

"Well, I get some dope and I sit in my room and I think. I don't bother talking about it because I just can't handle it. Besides, it makes me feel terrible. Or I drink."

Situation C

"Sometimes I get so mad I feel I am going to explode, or hit someone, or break a window or something. But then I start eating and I feel better."

Activity Three

More Choices:
Coping with Feelings, Responding to Feelings

Objectives

Cognitive: Students will be able to:

- Recognize at least three or four alert signals of depression.
- List people, memories, and events that provide a sense of pleasure in their lives.

Affective: Students will:

- Understand that people may feel apprehensive about depressed feelings.
- Realize that feelings of happiness, joy, and affection may also be difficult to express.
- Recognize that getting help in talking about feelings can be a healthy thing to do.

Skills: Students will be able to:

- Evaluate their own responses to depression and troubled feelings.
- Identify various positive coping strategies for use in their own lives.

Activity at a Glance

Students free-associate on the broad concept of troubled feelings, discuss symptoms of depression, and participate in a question-and-answer session with a mental health worker who has been invited as guest speaker. They then think about positive feelings, and begin to create "Feeling Good Books."

Preparation

1. Preview the activity and decide how you want to allot time for its parts. There are several alternatives:

- Three sessions, one to discuss troubled feelings with a mental health professional, one to focus on happy feelings, and one to make "Feeling Good Books."
- Two sessions, one focusing on troubled feelings and one on happy feelings.
- One session, focusing on troubled feelings but ending more positively with a brief discussion of happy feelings, with the "Feeling Good Books" assigned as homework.
- If for any reason you choose not to put as much emphasis on troubled feelings (see note in Activity One Preparation section), you may want to use "Recognizing Depression," pp. 12-15 in Thinking About Feelings, and spend more time on the discussion of happy feelings and the "Feeling Good Books."

2. Good background materials for this session can be found in The Body Book: "Changing Feelings," "Help: When You Need It/How to Ask," and "Help: Where to Get It." Since many young people become depressed over the divorce of their parents, we also suggest The Kid's Book of Divorce, (Lexington, MA: Lewis Publishing, 1981).

3. Duplicate "Depression" and "You Need to Know," a copy of both for each student, if you have not already done so.

4. Make sure your previously invited professional from the field of mental health knows when and where to appear. Remind the guest speaker that this will be an informal discussion about troubled feelings in general, but specifically about depression, with emphasis on when to seek outside help, and how to ask for it. Mention also that you'd like attention paid to the problem of what to do if a friend feels suicidal.

5. Have sheets of paper, scissors, and staplers on hand for assembling the "Feeling Good Books." If you have magic markers on hand, make them available for this exercise.

Procedure

1. Exploring Troubled Feelings

On the board, write "Troubled Feelings" and "Troubling Situations," and ask students what first comes to mind when they read the phrases. They should offer the very first things they think of, even if they seem unimportant or strange. Mention that sometimes troubled feelings are precipitated by external events, like the loss of someone close, and sometimes by internal "events," like setting unrealistic expectations for yourself. All people experience troubled feelings in their lives--just as all people experience joy, embarrassment, fear, excitement. Troubling situations and feelings plague everyone in the world.

No doubt, one of the feelings mentioned will be "depression," a feeling that deserves special attention. It should be emphasized that a prolonged depression calls for professional help. Ask students to refer to page 13 in Thinking About Feelings, and to look at the handouts "Depression" and "You Need to Know." Tell them to review them carefully, and to think about the questions they want to ask the guest speaker.

2. Introducing the Guest Speaker

Introduce your guest from the mental health field with a few remarks like the following:

> Depression affects all human beings at some point, or points, in their lives. Depression after the death of someone close, a divorce in the family, the disintegration of an important friendship or romantic relationship, or other losses, is natural and may last for some time.
>
> Sometimes people feel depressed over subtle or inevitable losses: for example, leaving childhood behind. Even achieving a goal or being successful can feel like a loss, because it signals the end of a project or period of hard work.
>
> If depression seems to last for a long time with no relief, if symptoms worsen, or if there are new symptoms, and you feel "stuck," it's time to get help. A list of places offering help appears on the handout, "Depression." Dr. (Mrs., Mr., Ms.) _____ is here to discuss some of these issues with us.

3. Depression: Getting at the Causes and Cures

The guest speaker can call for questions, which probably will include some of those listed below. If these questions do not come up, you should raise them yourself, because they are crucial to the message of this activity.

- What are the main causes of depression?
- What are some other causes, maybe not so catastrophic, that can contribute to depression?
- Who can you talk to when you realize you are becoming depressed?
- How can you feel better? What are some strategies for dealing with depressed feelings?
- How can you ask for help? What are some opening words to use with parents, friends, counselors, or other helping individuals?
- How do you know when to get outside help? (They should not wait until they are completely miserable, anguished, or severely depressed.)
- What are some places in the community where you can get help?
- How can you recognize signs of depression in yourself that indicate the need for professional help? In others?
- If you perceive suicidal intent in yourself or in others, what should you do? Should you talk to the parents of someone who is feeling suicidal?

To summarize the discussion, put the following categories on the board. Ask students to copy them in their notebooks and fill in the blanks privately. They can then refer to this sheet the next time they are feeling troubled. (To save time, you may want to duplicate the statements beforehand and distribute the sheets.)

LAST TIME I WAS TROUBLED OR DEPRESSED, I	NEXT TIME I AM TROUBLED OR DEPRESSED, I WILL	IF I NEED TO TALK TO SOMEONE I WILL CALL
_____	_____	_____
_____	_____	IF I NEED TO SEE SOMEONE "OUTSIDE," I WILL GO TO
_____	_____	_____

4. Focusing on Happy Feelings

Have students read Thinking About Feelings, pages 6 and 7 and think about the list of happy feelings. Then ask them to think of a recent event, relationship, or interaction that caused feelings of joy, happiness, warmth, affection, or love.

- How did you respond to having those feelings? How did you feel yourself?
- How did you convey those good feelings to others?

Then present the points in the following mini-lecture.

HAPPINESS: PEOPLE ARE DIFFERENT

Some people enjoy their positive feelings of love, pleasure, affection, or pride quietly; they take a walk, write in their diaries, or share good news with a friend. Others express happiness by hugging, dancing, shouting, or celebrating. For instance, small children are usually completely uninhibited; they show their joy, pride, or elation by leaping around, smiling with self-approval, and generally making everyone around them happy, too. But as we grow older we tend to become more subdued in our good feelings.

Sometimes you'd never guess you were in the presence of someone who was especially happy, because he or she doesn't show it. Perhaps that person feels awkward or embarrassed about expressing positive feelings. Many of us are taught that it's "silly" or "conceited" to acknowledge publicly our joy at personal accomplishments or victories. This makes it difficult to express good feelings.

Give students time to discuss positive feelings and their expression around some of the following questions, which lead into the next exercise.

- What are some quiet ways in which people express good feelings?
- Do you know anyone who cannot express feelings of happiness? Love? Affection? Why do you think the person has such difficulty?
- What does society teach us about expressing happiness?

- What does advertising teach us about happiness, or the expression of good feelings? (According to the advertisers, happiness seems to lie in consuming, having, buying, drinking, looking like, or smelling like what we see on TV or in magazines.)

- What kinds of things make you really feel good?

5. Making "Feeling Good Books"

Pass out paper, scissors, staplers, and magic markers. Tell the class they will now make a "Feeling Good Book," a kind of gift to themselves, in which they will put all reminders of pleasure or good feelings. They can start their books by writing in and completing the following sentences, which you can read aloud or put on the board:

- It feels great when...

- The happiest I ever was...

- I feel a lot of pride when...

- I feel good when I talk to...

- In the future, happiness will consist of...

- What I need to be happy is...

Ask students for more suggestions for this page of the "Feeling Good Book." Then tell them that they can also paste mementos in their books (like ticket stubs, a favorite recipe from a relative or friend, a score card, a report card) and other symbols of what makes them happy (like a leaf from an autumn walk, a cutout shape of a prized gift, a picture from a magazine that reminds them of a special event or personal experience). They can gather these mementos from home, bring them in for the next class, paste them in their "Feeling Good Books," and pass their books around to share and to learn about what makes other people happy.

Variation

Depending on the timing you choose for this activity, you may prefer to give students the guidelines for the "Feeling Good Books" but have them do the actual work on the books as homework.

DEPRESSION

Symptoms

If one or many of the following symptoms recur, last, or worsen, you be experiencing a significant depression:

- Feelings of sadness, inadequacy, disappointment about the past, pessimism about the future
- Inability to enjoy yourself or your usual pleasures
- Persistent feelings of anger, or of wanting to start fights
- Feeling that you are worthless and behaving as though to prove it--by doing things that are self-destructive, disturbing, offensive, or illegal
- Not taking care of yourself (eating poorly and overlooking grooming)
- Feeling tired all of the time, without being sick
- Dreading mornings, dreading decisions, crying without knowing why

While everyone feels sad or disappointed from time to time, in depression the causes of bad feelings may be unknown. You may not understand why you feel depressed. Your feelings may arise without explanation.

Being Good to Yourself

If you are depressed for a specific reason, your feelings may change as time passes and your circumstances change. You can help them change by moving on to new opportunities. Try to share your feelings with people you trust and who care about you--like parents, other relatives, or close friends. Try to move towards people, not away from them, and to concentrate on what you do well. Return to your normal patterns of diet, exercise, and recreation; force your body back into its normal routines. Some researchers believe that a chemical secreted in the body during exercise may even help people feel better. Even though it may be tempting to withdraw from activities when you're feeling low, try to keep up your participation.

If depression recurs or seems to last and last, if it interferes with your work or enjoyment of life, if you have persistent feelings of hopelessness and self-hate and feel generally "stuck," or if you feel as if you'll never be out from under the pain, you need to see a professional "listener"--a counselor, social worker, or psychologist--who can help you get on top of your feelings again.

Sometimes group therapy is available: such groups are made up of people who share similar concerns, and are run by a professional. Professional health care is always completely confidential, between you and your doctor or counselor. Your school counselors will know where you can get assistance, and in many cases charges are very low or services are free, if you cannot otherwise afford them. Some people find it difficult to seek outside or professional help; they may feel you have to be really sick or desperate. This is not true--it's just as important to take care of yourself before you get sick. If you worry that those around you, such as family or friends, may have negative reactions, remember it is a private, confidential matter that you do not have to share.

Where to Go, Whom to Call

- Guidance counselor, psychologist, or social worker at school
- Local teen center
- Local mental health center
- Free clinic
- Church or temple
- Private psychologist or psychiatrist (Under your parents' health plan you may be covered for these services.)

YOU NEED TO KNOW

About Suicidal Feelings

Sometimes, feelings can become so painful that a person begins to have suicidal thoughts. Such thoughts usually indicate the desire for relief from pain or conflict. If you begin to feel this way, seek comfort by talking to a trusted adult, or call a professional helper. Don't put it off: the sooner you get help, the better. (See Where to Go, Whom to Call, on handout titled "Depression.") If you need immediate help, most cities have a suicide prevention hot line. (Ask for listings under Suicide or Suicide Prevention.) You can also call your doctor or the emergency room of a hospital, the police, your church or temple, or the local health center, teen center, or mental health center. There are people ready to help you with these feelings at each of these places; making the call to them is the first step toward relief.

In addition, be aware of these "Myths and Facts" and "Warning and Danger Signs," so that you can help another person seek help if he or she is having these feelings.

About Myths and Facts*

Myth: People who talk about suicide don't kill themselves.

Fact: Eight out of ten people who commit suicide tell someone that they're thinking about hurting themselves before they actually do it.

Myth: Only certain types of people commit suicide.

Fact: All types of people commit suicide--male and female, young and old, rich and poor, country people and city people. It happens in every racial, ethnic, and religious group.

Myth: Suicide among kids is decreasing.

Fact: The suicide rate for young people has tripled in the last ten years.

Myth: When a person talks about suicide, change the subject and try to get his or her mind off it.

Fact: Take them seriously. Listen carefully to what they are saying. Give them a chance to express their feelings. Let them know you are concerned. And help them get help.

Myth: Most people who kill themselves really want to die.

Fact: Most people who kill themselves are confused about whether or not they want to die. Suicide is often intended as a cry for help.

---

*From Ruth Bell, Changing Bodies, Changing Lives (New York: Random House, 1980), pp. 141-142.

About Warning Signs*

Any of the following can be a warning sign:

- A big change in eating or sleeping habits.
- Suddenly not caring for prized possessions--giving away favorite records, a pet, clothing.
- A loss of interest in friends.
- A long and deep depression over a breakup or the death of a beloved person.
- A great change in school grades.
- Feeling hopeless or full of self-hate.
- Feeling constantly restless or hyperactive.
- Actually making a suicide attempt.

About Danger Signs*

Recognize the following danger signs:

- They say they intend to hurt themselves.
- They have a plan for how to do it.
- They have in their possession pills or a weapon of some kind.
- There is evidence they have already hurt themselves.
- The person is dazed or unconscious.

What to Do in an Emergency*

In an emergency, contact any of the following:

- Your local police.
- An adult you trust.
- An ambulance service in your town.
- The emergency room of a local hospital.

Do not leave the person alone, but contact an adult as soon as possible--you should not deal with this situation by yourself.

*Adapted from Ruth Bell, Changing Bodies, Changing Lives, pp. 141-142.

Activity Four

Skills:
Responding to the Feelings of Others

Objectives

Cognitive: Students will be able to:

- Identify at least two strategies for helping others cope with feelings.
- List the important elements of reflective/active listening.

Affective: Students will:

- Recognize that helping others is part of life and contributes to a personal sense of well-being.
- Acknowledge that helping others can be a skill.
- Value reflective/active listening as a communication technique.

Skills: Students will be able to:

- Identify statements that open or close communication.
- Practice helping skills.
- Transfer knowledge of coping skills to others.

Activity at a Glance

Students brainstorm ways of caring. Through a mini-lecture, they learn about elements of reflective/active listening. Finally, they use an activity in Thinking About Feelings to practice these skills, and perform a brief role play. Later, they write a "Dear Abby" letter about a "feeling" problem of a friend or family member. The class, working together, writes "Abby's" response to each problem.

Preparation

1. If you have a tape recorder in the classroom, it may be helpful for this activity. If not, students can simply read aloud from the exercises.

2. As background information, you may want to read Parent Effectiveness Training by Thomas Gordon (New York: Peter H. Wyden, 1975). The P.E.T. techniques of effective communication have proven useful to parents, teachers, and adults who work with children and adolescents. The book will give you some extra material on the subject of active listening.

3. Arrange to get a large pad of paper with sheets that can easily be torn off for the second day's class. Place this at the front of the class, where all the students can see it.

Procedure

Day One

1. Helping People with Their Feelings

Tell the class that every day, even without being aware of it, we help other people get along with their feelings. Discuss the following points:

- Describe the last time you responded to a friend who needed help; to a family member; to a stranger. (Mention no names.)
- How did you know what these people were feeling?
- How did you start the "helping?"
- What did you "get" from helping?

Next, ask for a volunteer to describe in detail one of the "helping" situations he or she has experienced. Ask:

- Do you feel that the communication was successful? Why or why not?
- What was the outcome?

2. Notes for Teacher Mini-Lecture

LISTENING--ACTIVELY

There are certain communication skills that can help us recognize other people's feelings, in order to help them deal with their emotions. People cannot solve problems for each other, but they can become better listeners for each other.

Learning to listen in ways that help the person with the problem deal with it more effectively is important, because many people are uneasy about bringing their feelings into the open. Some people are troubled by their feelings, some feel it is "weak" to express them, and some have been taught to ignore feelings of anger or depression. Still others may feel that if they do express their emotions or feelings, they will be criticized or will alienate their listeners. In some cases, people are simply not aware of their feelings. Active listening gives the other person an invitation to think about what they are feeling, to say more, and to be less afraid of "bad" feelings.

3. Reflective Listening

Read aloud "Helping a Friend Sort Out Feelings," page 22 in Thinking About Feelings. Ask students to look at the examples on page 23. These "first lines" represent statements that are packed with emotional content. The two responses provided represent the first steps in reflective listening: picking up on feelings and paraphrasing them. After reading these first two responses, ask students to think about the other statements and write down their responses on a separate sheet of paper. Give them the following tips:

- After someone expresses a feeling or idea, ask yourself, "What seems to be going on with the person I am talking to?"
- Take some time to think about what you might say.
- Then respond by expressing your understanding of what the person has said. Do it in a slightly different way, without judging, mocking or mimicking. This is called paraphrasing.

After they have written down their replies, ask students to share their responses. There are no "right" answers; the responses must simply pick up on the feeling that underlies each statement. Look for the following kinds of perceptions in the students' responses:

- "My Dad's been transferred again...": speaker feels troubled and resentful about having had to move so much.
- "I saw her with another guy...": speaker is hurt and jealous (but is he being too hasty in judgment?).
- "Ms. Long wants me to...": speaker feels shy, forced into an activity. (Why is speaker so threatened?)
- "What will I do if the scholarship...": speaker feels somewhat helpless and fearful.
- "I think I'm coming out of the fog...": speaker feels very optimistic (too optimistic?).
- "I can't have him over...": speaker feels ashamed (seems to feel that house reflects on her?).

4. Role Playing Active Listening

Ask for four volunteers--two listeners, two speakers--to role play two conversations, with the following first lines as a starting point:

Speaker #1: "Why the hell do they have to get divorced? I wish they'd jump off a bridge!"

Speaker #2: "She's a hot shot, in general. I am a loser in general."

Tell students that the listener should communicate that she or he really cares about the speaker and is interested in what the speaker is saying. The listener can communicate this by saying, "I see," "Tell me more," "Really," or "I hear you." The listener might also make reassuring comments like, "I'll call tonight to see how things are going."

Note that these "first lines" could be the comments of a teen who needs to see a counselor or other adult for a serious problem. Depending on how the conversations go, you may have to lead the listener to that conclusion. If necessary, refer them back to one of the handouts used in Activity Three, which describes symptoms of depression that may indicate the need for professional help.

If a tape recorder is available you might tape the two conversations, then play them back to the students. Ask:

- Did the two people seem to understand each other?
- What did the listener do to keep the conversation going?

- What important feelings did the speaker reveal?
- Did the speaker seem to feel understood?
- Did the listener seem to exercise good judgment on whether the speaker might need outside help?

Speaker #1 is angry and sad. One important point to note here is that feelings do not make things happen. Sometimes, it is natural to wish destructive things on people we are furious at, but that doesn't make us responsible if something unfortunate does indeed happen. Speaker #2 is depressed. The listener should try to find out whether the speaker's low self-esteem is a reaction to something in particular. If it has been present for a long time, professional help may be indicated.

Day Two

1. Responding to Problems by Letter

Note: This activity is a version of the one on page 25 of Thinking About Feelings. The emphasis here is on group participation in solving the "feeling" problems of others, bringing together everyone's communication skills and knowledge of coping strategies. You might do one or two "Dear Abbys" as a whole class before doing the activity in the book; alternately you might assign the exercise in the book as homework after this activity. It could then serve to amplify the classroom learning experience.

Begin a brief discussion of problems that involve feelings by reviewing the situations discussed the previous day and then asking:

- Do you know anyone who's going through certain feelings they don't understand? Disturbing ones? Confusing sexual feelings? Feelings of jealousy or grief?
- Has a family member been undergoing any special stress?
- Is there an unresolved situation from the past (involving someone you know) that you'd like to do more thinking about?

Ask each student to pick one "feeling" problem from the categories above or other situations they are familiar with, and write an anonymous letter about, like a "Dear Abby," being careful to preserve privacy. Explain that the letters will be answered by the class as a whole, acting as "Abby."

When all letters have been handed in, place them in a large container and pick one or two at random. Read one aloud. Ask the students as a group:

- What does this person seem to be feeling?
- What seems to be the problem?
- How would you begin a conversation with this person?
- What kind of coping strategy would you recommend?
- Where would you tell this person to go for help?

Tell the students they are going to write X a letter, and ask for the first line. Then call for another and another, until you have a small paragraph that can help "Anonymous" with his or her problem. Be sure students cover coping strategies, people to talk to, and how to get outside help, if appropriate. Repeat procedures 4 and 5 with one or two other letters.

2. Homework

To help students practice their new helping skills, give them the first lines of role plays used in Activity One and have them respond through reflective listening. In addition, refer them back to "Some Straight Talk About Coping Strategies," pages 16-19 of Thinking About Feelings. They might also look at page 12 of Thinking About Feelings, and rephrase Maria's comments to include reflective listening.

Variation

If video equipment is available in your school, you may want to videotape students doing their reflective listening responses. This will enable them to watch their body language, an important part of communication that they cannot pick up on audio-tape.

Activity Five

Explorations:
Feelings and Self-Acceptance

Objectives

Cognitive: Students will be able to:

- Identify typical feelings that can be obstacles to self-acceptance.
- Cite concrete steps that can be taken to help overcome these obstacles.

Affective: Students will:

- Realize that accepting one's feelings leads to self-acceptance.
- Recognize that it is possible to change feelings about oneself.

Skills: Students will improve their ability to:

- Analyze negative feelings that are common among adolescents searching for self-esteem.
- Set personal goals to further self-acceptance.

Activity at a Glance

Students analyze situations in which fellow adolescents, for one reason or another, do not feel very good about themselves, and suggest steps that can be taken to correct the situation. They then write letters to themselves, in which they explore feelings about themselves, and set goals towards further self-acceptance.

Preparation

1. Duplicate the "How Can They Feel Better?" situations, page 46, and paste each situation on a separate index card.

2. Have paper and pencils available.

Procedure

1. Notes for Teacher Mini-Lecture

ACCEPTING YOURSELF

Accepting yourself means tolerating your mistakes and knowing that your less desirable traits are not so terrible. It means being as forgiving of yourself as you are of friends or family. Self-acceptance is a process by which we learn to be our own good companions. But self-acceptance can be a difficult process. There can be significant obstacles in its way. It is a process that many people have to learn, but the learning is always worthwhile. Remember, the only person who is guaranteed to be around for the rest of your life is you!

2. Gaining Self-Acceptance

Divide the class into groups and give each group one of the "How Can They Feel Better" situation cards. Explain that the situations focus on some universal feelings--feelings that many of them will have experienced. Each group should analyze its situation, develop constructive steps for the person in the situation to take, and report back to the class. (Alternatively, if you would prefer not using small groups here, the whole class could discuss each situation.)

Ask the groups to focus on the following questions:

- What are the important obstacles to self-acceptance in this scene?
- What are this teen's feelings?
- How can this teen understand his or her feelings better?
- How can he or she achieve greater self-acceptance?

- What are some concrete steps this person can take towards accepting him- or herself?

- If you were this person, what would you do? Whom would you talk to?

As the groups report back, guide the discussion toward these points:

Leroy: Focusing more on his talent (music) and less on what he doesn't do well (sports) will help him accept himself. No one can be expert at all things, though sometimes we unrealistically want to be.

Concrete steps: He should try communicating with his father, and perhaps invite him to a performance. He could try taking the initiative: "I'd really like it if you went with ...." He might also ask his music teacher or another teacher to explain to his parents Leroy's contribution to the orchestra.

Marita: Feeling alone can feel like being excluded, but Marita enjoys solitude. She needs to accept the idea that she likes to be alone, that she's more contemplative than the popular crowd.

Concrete steps: Her interest in books could be channeled: has she tried to be on the yearbook staff? To tutor younger children? To work in the school or local library, maybe as a volunteer? She needs to talk to someone who is supportive.

Jeanine: Teens often feel competitive about their appearance--but who has ever defined "pretty enough"? She needs to capitalize on her academic skills, and work to resolve the issue of "pretty enough." She is denying her positive traits. Self-esteem means recognizing and accepting both your strong and weak points.

Concrete steps: She should talk to someone close to her about her feelings--often airing feelings of inadequacy can help you work through them. Feeling inadequate can mean you have forgotten your strong points.

Ron: Sexual feelings, whenever they take place, are natural. He's ashamed and angry at himself for what happens to almost every teen. Sexual feelings are new and confusing--but not bad or shameful.

Concrete steps: He needs to talk to other boys, an adult male he respects, or a counselor who can help him accept his perfectly normal sexual feelings.

Lynn: Almost everyone has moments of shyness, and some people are naturally less aggressive in their pursuit of

friendships than others. This is a feeling that is particularly painful during adolescence. It is not, however, a permanent characteristic.

Concrete steps: First he needs to understand that shyness is not an inborn characteristic; he is not necessarily always going to be shy. Talking with a counselor or a respected adult can help. He should choose one of his interests, one he most wants to pursue, and find a club or group devoted to that interest. He will find it easier to make friends in a group that meets around a common interest. (Note that name in this situation is deliberately sexually ambiguous; Lynn could just as well be a girl. Shyness is common to both sexes in adolescence.)

3. "A Letter to Myself"

Ask students to take the next few minutes to write a private piece called, "Letter to Myself: How I Feel." Assure them that no one else will see it. They should think about their unique qualities, their achievements, their strong points--as well as any other aspects they would like to include. Read the following suggested areas to consider (or write them on the board):

- What I value most about myself/What I feel about myself
- What I feel others value in me
- What really bothers me
- What I'd like to feel better about
- What I have trouble handling
- What I mostly need from other people--and get
- What I mostly need from other people--and don't get
- What I'd like to change about myself
- What I'd never change about myself
- What I care about most
- Whom I feel I can really talk to
- What I love about myself
- What I feel best about

When everyone has finished ask students to look at their letters and search for one "feeling issue" that could be worked on--like feeling better about relationships with parents or friends, feeling more at ease in school, or becoming more self-confident. Each student should set a goal for improving feelings on a particular issue by considering concrete steps toward that goal.

Have them set up three columns at the bottom of their letters, with the following headings: "Feeling," "Goal," "Steps Toward Goal." As examples, write the following on the board.

Feeling:	Goal	Steps Toward Goal:
Unattractive because of all these pounds!	Losing weight.	See a doctor, exercise, give up sweets.
So shy...all the time	Ask a friend over, say hello in school hallway.	Talk to my sister.
Blue..so much of the time	Just to feel better...	See a counselor?

Suggest to students that they put their letters with goals away in a safe, private spot so they can put them out now and again to check their progress. At some future time they may want to revise their letters and/or change their goals. The document can become a personal checklist of how they are developing in their feelings about themselves.

4. Conclusion

To conclude the activity and the module, remind students of the last sentence in the mini-lecture, "Remember, the only person who is guaranteed to be around for the rest of your life is you." Ask them to think about what this statement means to them. They may want to add it as a postscript to their letters.

Variation

A different approach to the material in this activity appears on pages 26-27 of Thinking About Feelings. Those exercises can help teens work on their self-concept, with the goal of self-acceptance. All of the tasks have feeling components, but as stated some of them emphasize dealing with the external world. If you use this version, change the emphasis slightly to highlight the importance of self-acceptance.

Used together, the activities on pages 26 and 27 complement Activity Five and round out the module. Directly or indirectly, all major issues are addressed: knowing your feelings and accepting them, coping with feelings, understanding the feelings of others, and understanding one's own feelings. In effect, mastering each of these tasks brings you a little closer to self-acceptance, the major goal of understanding feelings.

HOW CAN THEY FEEL BETTER?

LEROY

"Seems like whatever I do, it's not good enough for my parents. I mean, here I play the violin in the orchestra, but since I'm not on the football team, it's not good enough."

MARITA

"I just get this feeling I'm all alone sometimes. I have friends, sure--but sometimes I'd just rather read and think. They call me a bookworm! They're the popular ones."

JEANINE

"I'm not smart enough. I'm not pretty enough, either. My brother says I'm good-looking, but what does he know? Sure, I get A's. But what does that matter? It doesn't get the boys."

RON

"Sometimes when I sit in class, I get these--you know--excited feelings about girls and stuff. Then I feel ashamed--like, here I'm supposed to be paying attention, and all I can think of is girls!"

LYNN

"It's so hard for me to talk to people, to get to know them and make friends. Maybe I'm boring, but I really do have lots of interests. It's just that I've always been shy, and I guess if you're born that way, that's it."

Other Programs and Resource Materials

A Selected List of Other Materials Relevant to "Living With Feelings."

ADDITIONAL INFORMATION FOR TEACHERS.

Todd, Karen. Promoting Mental Health in the Classroom.
Washington, D.C.: National Institute of Mental Health, 1973.

Dower, Eli M. Teachers Talk About Their Feelings.
Washington, D.C.: National Institute of Mental Health, 1973.

CURRICULA

Cromwell, Chester R. et al. Becoming. Philadelphia: J.B. Lippincott, 1975.

Consists of a series of student logs, leader's guides, and audiocassette material intended to help an individual structure the processes which lead to personal development.

Dealing With Aggressive Behavior. (1971)

A program at the middle school level in the constructive control of aggressive behavior. Consists of a student book and a teacher's guide.
Available from: Educational Research Council of America
Rockefeller Building
Cleveland, Ohio 44113

Dimella, Nancy; and Bershad, Carol. The Changer and The Changed. (1981)

A book, with an accompanying workbook (The Journal of the Changer and The Changed) designed to help students acquire the skills necessary to make positive changes and choices in their lives.
Available from: Learning for Life/Management Sciences for Health
165 Allandale Road
Boston, MA 02130
(617) 524-7799

Hebeisen, Ardyth. PEER Program For Youth. (1973)

A program of activities designed to help young people develop self-esteem, self-understanding, and communication skills.
Available from: Augsburg Publishing House
426 South Fifth Street
Minneapolis, Minnesota 55415

Kirschenbaum, Howard; and Glaser, Barbara.
Skills For Living. (Teacher's Guide). (1978)
You Are Somebody Special. (Student Book). (1978)

A program to help students and their parents learn basic skills in problem-solving, communication, increasing self-esteem, and decision-making, and in applying these skills to various aspects of their life.
Available from: Quest Incorporated
2707 North Main Street
Findlay, Ohio 45840
(419) 424-9693

Life Skills for Health: Focus on Mental Health. (1974)

Two curriculum resource guides (one for the 7-9 grade level and one for the 10-12 grade level) and a teacher's guide designed to influence the students' health-related behavior in ways that mere provision of health information cannot.
Available from: Peggy Rackness
Division of Health, Safety, and Physical Education
State Department of Public Education
Raleigh, North Carolina 27611
(919) 733-3906

Life Skills for Mental Health: Ages 15-18. (1977)

A teacher's guide describing activities which the teacher and students do together to help them learn important skills in dealing with problems and challenges of living, changing, and growing.
Available from: University of Georgia Editorial Services
Center for Continuing Education
University of Georgia
Athens, Georgia 30602

MATERIAL FOR THE TEEENAGE READER

Bell, Ruth. Changing Bodies, Changing Lives. New York: Random House, 1980.

A book for teenagers on sexuality and relationships.

McCoy, Kathy; and Wibblesman, Charles. The Teenage Body Book.
New York: Simon and Schuster, 1980.

A book for teenagers designed to help them understand their own bodies.

Le Shan, Eda. What Makes Me Feel This Way? Growing Up With Human Emotions.
New York: Macmillan, 1972.

A book designed to help seventh and eighth graders explore and understand their own feelings.

SOME NATIONAL HEALTH ORGANIZATIONS

The following list is a sampling of national organizations offering health information. It is not intended to be exhaustive, and will hopefully be updated periodically to identify organizations that have been missed or that have produced new resources useful in health education curricula. THOSE SEEKING PUBLICATIONS OR INFORMATION ASSISTANCE FROM THESE ORGANIZATIONS SHOULD ALWAYS DETERMINE IF THERE IS A LOCAL OR STATE AFFILIATE OF THE NATION ORGANIZATION AND CONTACT THE CLOSEST OFFICE FIRST. Addresses and phone numbers can be checked through telephone directories, libraries, and local health agencies. ALSO HEALTH INFORMATION AND HELP IN IDENTIFYING OTHER VALUABLE RESOURCES CAN FREQUENTLY BE OBTAINED FROM OFFICIAL STATE AND LOCAL HEALTH AND EDUCATION AGENCIES, COLLEGE AND UNIVERSITY HEALTH EDUCATION PERSONNEL, AND/OR LIBRARY REFERENCE GUIDES. Many of the publications and services are free to the public; others involve a nominal charge.

Action on Smoking and Health
2013 H St., N. W.
Washington, D.C. 20006

Al-Anon Family Group Headquarters, Inc.
P. O. Box 182
Madison Square Station
New York, NY 10059-0182

Alcoholics Anonymous
P. O. Box 459
Grand Central Station
New York, NY 10163

American Academy of Dermatology
820 Davis
Evanston, IL 60201

American Alliance for Health, Physical Education, Recreation and Dance
Association for the Advancement of Health Education
1900 Association Drive
Reston, VA 22091

American Cancer Society
777 Third Avenue
New York, NY 10017

American Council on Marijuana and Other Psychoactive Drugs
6193 Executive Boulevard
Rockville, MD 20852

American Dental Association
Bureau of Health Education and Audiovisual Services
211 E. Chicago Avenue
Chicago, IL 60611

American Diabetes Association
Two Park Avenue
New York, NY 10016

American Dietetic Association
430 N. Michigan Avenue
Chicago, IL 60611

American Hearing Society (formerly National Association for Hearing and Speech Action)
10801 Rockville Pike
Rockville, MD 20852

American Heart Association
7320 Greenville Avenue
Dallas, TX 75231

American Hospital Association
Department of Order Processing
840 N. Lake Shore Drive
Chicago, IL 60611

American Lung Association
1740 Broadway
New York, NY 10019

American Medical Association
Department of Health Education
535 N. Dearborn Street
Chicago, IL 60610

American Medical Association Auxiliary
535 N. Dearborn Street
Chicago, IL 60610

American Optometric Association
Attn: Communications Division
243 N. Lindberg Boulevard
St. Louis, MO 63141

American Osteopathic Association
Public Relations Department
212 E. Ohio Street
Chicago, IL 60611

American Pharmaceutical Association
2215 Constitution Avenue, N.W.
Washington, DC 20037

American Podiatry Association
Council On Education
20 Chevy Chase Circle, N.W.
Washington, DC 20015

American Red Cross
17th and E Streets, N.W.
Washington, DC 20006

American School Health Association
P.O. Box 708
Kent, Ohio 44240

American Social Health Association
260 Sheridan Avenue
Palo Alto, CA 94306

Arthritis Foundation
1314 Spring Street
Atlanta, GA 30309

Association for Retarded Citizens
(formerly National Association for Retarded Children)
P.O. Box 6109
Arlington, TX 76011

Asthma and Allergy Foundation of America
1302 18th Street, N.W., Suite 303
Washington, DC 20036

Blue Cross/Blue Shield Association
676 N. Saint Clair Street
Chicago, IL 60611

Cystic Fibrosis Foundation
Suite 558
3384 Peachtree Road, N.E.
Atlanta, GA 30326

Epilepsy Foundation of America
4351 Garden City Drive
Suite 406
Landover, MD 20785

Family Service Association of America
44 E. 23rd Street
New York, NY 10010

Group Against Smoker's Pollution
P.O. Box 632
College Park, MD 20740

Kimberly-Clarke
Life Cycle Center
2100 Winchester Road
Neenah, WI 54956

Leukemia Society of America
800 Second Avenue
New York, NY 10017

March of Dimes, Birth Defects Foundation
1275 Mamaroneck Avenue
White Plains, NY 10605

Mental Health Materials Center
30 E. 29th Street
New York, NY 10016

Metropolitan Life Insurance Co.
Health and Safety Education Div.
One Madison Avenue
New York, NY 10010

Muscular Dystrophy Association
810 Seventh Avenue
New York, NY 10019

National Center for Health Education
30 E. 29th Street
New York, NY 10016

National Council on Alcoholism, Inc.
733 Third Avenue Suite 1405
New York, NY 10017

National Cystic Fibrosis Research Foundation
60 E. 42nd Street, Suite 1563
New York, NY 10017

National Dairy Council
6300 N. Rier Road
Rosemont, IL 60018

National Easter Seal Society
2023 W. Ogden Avenue
Chicago, IL 60612

National Fire Protection
Association
Battery March Park
Quincy, MA 02269

National Genetic Foundation
555 W. 57th Street
New York, NY 10019

National Hemophilia Foundation
19 W. 34th S., Suite 1204
New York, NY 10001

National Kidney Foundation
Two Park Avenue
New York, NY 10016

National Mental Health Association
1800 N. Kent Street
2nd Floor
Arlington, VA 22209

National Multiple Sclerosis
Society
20 E. 42nd Street
New York, NY 10017

National Safety Council
444 N. Michigan Avenue
Chicago, IL 60611

National Society for the Prevention
of Blindness, Inc.
79 Madison Avenue
New York, NY 10016

National Tay-Sachs and Allied
Diseases Association, Inc.
92 Washington Avenue
Cedarhurst, NY 11516

Planned Parenthood Federation
of America, Inc.
810 Seventh Avenue
New York, NY 10019

Public Affairs Committee, Inc.
381 Park Avenue South
New York, NY 10016

Tampax, Incorporated
Department HI
P.O. Box 7001
Lake Success, NY 11402

United Cerebral Palsy Association
330 E. 34th Street
New York, NY 10001

United Parkinson's Foundation
220 S. State St., Room 1808
Chicago, IL 60604

FEDERAL GOVERNMENT RESOURCES

Arthritis Information Clearinghouse
1700 N. Moore Street
Arlington, VA 22209

Cancer Information Clearinghouse
National Cancer Institute
Office of Cancer Communications
Building 31, Room 10A18
9000 Rockville Pike
Bethesda, MD 20205

Center for Health Promotion
and Education
Division of Health Education
Centers for Disease Control
Atlanta, GA 30333

Clearinghouse on the Handicapped
330 C Street, S.W.
Washington, DC 20201

Consumer Information Center
Pueblo, CO 81009

Environmental Protection Agency
Public Inquiries Center, PM 211-B
401 "M" Street, S.W.
Washington, DC 20460

Food and Drug Administration
Office of Consumer Inquiries (HFE-88)
5600 Fishers Lane
Rockville, MD 20857

Food and Nutrition Information
Center (FNIC)
3101 Park Center Drive
Alexandria, VA 22302

High Blood Pressure Information
Center
120/80 National Institutes of
Health, Box UR
Bethesda, MD 20205

National Center for Education in
Maternal and Child Health
3520 Prospect Street, N.W.
Washington, DC 20007

National Clearinghouse for
Alcohol Information
P.O. Box 2345
Rockville, MD 20857

National Clearinghouse for
Drug Abuse Information
5600 Fishers Lane, Room 10A43
Rockville, MD 20857

National Clearinghouse for Family
Planning Information
P.O. Box 2225
Rockville, MD 20857

National Clearinghouse for
Mental Health Information
Public Inquiries Section
5600 Fishers Lane, Room 15C17
Rockville, MD 20857

National Diabetes Information
Clearinghouse
Box NDIC
Bethesda, MD 20205

National Digestive Diseases Education
and Information Clearinghouse
1555 Wilson Blvd., Suite 600
Rosslyn, VA 22209

National Health Information
Clearinghouse (NHIC)
P.O. Box 1133
Washington, DC 20013-1133

National Highway Traffic Safety
Administration (NHTSA)
U.S. Department of Transportation
400 7th Street, S.W.
Washington, D.C. 20590

National Injury Information
Clearinghouse
5401 Westbard Avenue, Room 615
Washington, DC 20207

National Institute for Drug Abuses
5600 Fishers Lane
Rockville, MD 20857

National Fire Protection
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Battery March Park
Quincy, MA 02269

National Genetic Foundation
555 W. 57th Street
New York, NY 10019

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Public Affairs Committee, Inc.
381 Park Avenue South
New York, NY 10016

Tampax, Incorporated
Department HI
P.O. Box 7001
Lake Success, NY 11402

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330 E. 34th Street
New York, NY 10001

United Parkinson's Foundation
220 S. State St., Room 1808
Chicago, IL 60604

FEDERAL GOVERNMENT RESOURCES

Arthritis Information Clearinghouse
1700 N. Moore Street
Arlington, VA 22209

Cancer Information Clearinghouse
National Cancer Institute
Office of Cancer Communications
Building 31, Room 10A18
9000 Rockville Pike
Bethesda, MD 20205

Center for Health Promotion
and Education
Division of Health Education
Centers for Disease Control
Atlanta, GA 30333

Clearinghouse on the Handicapped
330 C Street, S.W.
Washington, DC 20201

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Pueblo, CO 81009

Environmental Protection Agency
Public Inquiries Center, PM 211-B
401 "M" Street, S.W.
Washington, DC 20460

Food and Drug Administration
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5600 Fishers Lane
Rockville, MD 20857

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3101 Park Center Drive
Alexandria, VA 22302

High Blood Pressure Information
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120/80 National Institutes of
Health, Box UR
Bethesda, MD 20205

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3520 Prospect Street, N.W.
Washington, DC 20007

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P.O. Box 2345
Rockville, MD 20857

National Clearinghouse for
Drug Abuse Information
5600 Fishers Lane, Room 10A43
Rockville, MD 20857

National Clearinghouse for Family
Planning Information
P.O. Box 2225
Rockville, MD 20857

National Clearinghouse for
Mental Health Information
Public Inquiries Section
5600 Fishers Lane, Room 15C17
Rockville, MD 20857

National Diabetes Information
Clearinghouse
Box NDIC
Bethesda, MD 20205

National Digestive Diseases Education
and Information Clearinghouse
1555 Wilson Blvd., Suite 600
Rosslyn, VA 22209

National Health Information
Clearinghouse (NHIC)
P.O. Box 1133
Washington, DC 20013-1133

National Highway Traffic Safety
Administration (NHTSA)
U.S. Department of Transportation
400 7th Street, S.W.
Washington, D.C. 20590

National Injury Information
Clearinghouse
5401 Westbard Avenue, Room 615
Washington, DC 20207

National Institute for Drug Abuses
5600 Fishers Lane
Rockville, MD 20857

National Institutes of Health
Bethesda, MD 20205

National Heart, Lung, and Blood Institute
Public Information and Reports Branch
Building 31, Room 4A21
National Institutes of Health
Bethesda, MD 20205

Office of Consumer Affairs
Washington, DC 20201

Office on Smoking and Health
Technical Information Center
Park Building, Room 116
5600 Fishers Lane
Rockville, MD 20857

President's Council on Physical Fitness and Sports
450 Fifth Street, N.W.
Suite 7103
Washington, DC 20001

Superintendent of Documents
U.S. Government Printing Office
Washington, DC 20402

U.S. Consumer Product Safety Commission
Washington, DC 20207

U. S. Department of Agriculture
Washington, D.C 20250

U. S. Department of Health and Human Services
Washington, DC 20201

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